

SENATE BILL 3164

By Stanley

AN ACT to amend Tennessee Code Annotated, Title 56,
relative to prosthetic devices.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Title 56, Chapter 7, Part 26, is amended by adding the following as a new, appropriately designated section:

Section 56-7-26__.

(a) All individual and group health insurance policies providing coverage on an expense-incurred basis, individual and group service contracts issued by a health maintenance organization, self-insured group arrangements to the extent not preempted by federal law, and managed health care delivery entities of any type or description, that are delivered or issued in this state on or after January 1, 2009, shall include in each policy or contract of insurance notice that coverage is, or is not, provided for prosthetic devices as described in § 63-3-201 under such policy or contract of insurance.

(b) If coverage is provided for prosthetic devices, then the policy or contract of insurance shall specify in detail the terms and conditions of such coverage including:

(1) If a device is required to be fitted and dispensed by a practitioner licensed under title 63 acting under a prescription issued by a licensed medical practitioner authorized to issue such prescriptions in order to be covered by the policy or contract of insurance;

(2) The extent of coverage provided;

(3) The process by which a determination shall be made that a device is the most appropriate model that adequately meets the medical

needs of the enrollee;

(4) If prior authorization for prosthetic devices is required in the same manner as prior authorization is required for any other covered benefit;

(5) If coverage is also provided for repair or replacement of a prosthetic device and the procedures under which a determination shall be made that a repair or replacement is appropriate; and

(6) If coverage under this section is provided through a managed care plan, whether a carrier requires that a prosthetic service be rendered by a provider who contracts with the carrier and that a prosthetic device be provided by a vendor designated by the carrier or if an enrollee may instead choose a licensed provider of prosthetic devices that agrees to accept payment under the same terms as providers so designated by the carrier.

SECTION 2. The requirements of this act apply to all policies, contracts and certificates executed, delivered, issued for delivery, continued or renewed in this state on or after January 1, 2009. For purposes of this act, all contracts are deemed to be renewed no later than the next yearly anniversary of the contract date.

SECTION 3. This act shall take effect upon becoming law, the public welfare requiring it.